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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	Jorge First name	First name
license or passport).		Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Velasquez Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7298	

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Case number (if known)

Debtor 1 Jorge Velasquez

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs. Business name(s)			
	Include trade names and doing business as names	Business name(s)				
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		220 W. Highland Ave Elgin, IL 60123				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Kane				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
ŝ.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Jorge Velasquez

Case number (if known)

' .	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> a coage 1 and check the appropriate	1 U.S.C. § 342(b) for Individuals Filing for Bankruptcy box.
	choosing to file under	■ Cha	apter 7			
		☐ Cha	apter 11			
		☐ Cha	apter 12			
		☐ Cha	apter 13			
3.	How you will pay the fee	a	bout how yo	ou may pay. Typio attorney is subm	cally, if you are paying the fee yo	with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money lf, your attorney may pay with a credit card or check with
						n, sign and attach the Application for Individuals to Pay
			•		(Official Form 103A).	only if you are filing for Chapter 7. By law, a judge may,
		b a	out is not rec applies to yo	uired to, waive your family size and	our fee, and may do so only if you I you are unable to pay the fee in	ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out all Form 103B) and file it with your petition.
).	Have you filed for bankruptcy within the last 8 years?	■ No.				
	.uo. o you.o.	— 103.	District		When	Case number
			District		When	Case number
			District		When	Case number
0.	Are any bankruptcy cases pending or being	■ No				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
			Debtor	-		Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		When	Case number, if known
1.	Do you rent your residence?	■ No.	Go to	ine 12.		
		☐ Yes.	. Has yo	our landlord obtain	ned an eviction judgment against	you and do you want to stay in your residence?
				No. Go to line 1	2.	

Document Debtor 1 Jorge Velasquez

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Case number (if known)

Par	Report About Any Bu	sinesses	You Owi	n as a Sole Propriet	or			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	e and location of bus	iness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	Number, Street, City, State & ZIP Code				
	it to this petition.		Chec	k the appropriate bo	x to describe your business:			
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))			
				None of the above	3			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline. operatior in 11 U.S	s. If you in ns, cash-f S.C. 1116	ndicate that you are a low statement, and fo (1)(B).	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	■ No. I am not filing under Chapter 11.						
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.					
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?				
	identifiable hazard to public health or safety? Or do you own any							
	property that needs immediate attention?			diate attention is , why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?				
					Number, Street, City, State & Zip Code			

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Debtor 1 Jorge Velasquez

orge verasquez

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

5/25/17 2:46PM

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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5/25/17 2:46PM Document Page 6 of 54 Case number (if known) Debtor 1 Jorge Velasquez Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ■ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jorge Velasquez Signature of Debtor 2 Jorge Velasquez Signature of Debtor 1 Executed on Executed on

May 25, 2017 MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Jorge Velasquez

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ James	A. Young	Date	May 25, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
James A.	Young		
Printed name			
	Young Law		
Firm name			
85 Market	Street		
Elgin, IL 6	0123		
Number, Street,	City, State & ZIP Code		
Contact phone	847-793-1031	Email address	sarai@jamesyounglaw.com
6217342			
Bar number & S	tate		

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Fill in this information to identify your case:

Debtor 1

Debtor 2

(Spouse if, filing)

First Name

Middle Name

Last Name

Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

☐ Check if this is an amended filing

Official Form 106Sum

Case number (if known)

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$ \$ Your lia	f what you own 0.00 12,573.89
1a. Copy line 55, Total real estate, from Schedule A/B	\$ \$	12,573.89
1c. Copy line 63, Total of all property on Schedule A/B	\$ Your lia	
2: Summarize Your Liabilities	Your lia	12,573.89
Schoolula Di Craditara Wha Haya Claima Sagurad by Dragarti (Official Form 100D)		
Cabadyla D. Craditora Wha Llava Claima Cagyrad by Dranath (Official Form 105D)	Amount	abilities : you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	23,365.0
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	22,981.1
Your total liabilities	\$	46,346.10
3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,620.0
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,105.00
4: Answer These Questions for Administrative and Statistical Records		
Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other sch	edules.
■ Yes What kind of debt do you have?		
	2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Jorge Velasquez

Document Page 9 of 54
Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Dort A on Cohodula E/E compthe following.	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this informs		Document	Page 10 of 54		5/25/17 2:46P
riii in this informa	ation to identify your	case and this filing:			
Debtor 1	Jorge Velasquez	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
		NORTHERN DISTRICT OF ILL			
Case number					Observativity in the second
					☐ Check if this is an amended filing
Official For	m 106A/B				
Schedule	A/B: Prop	erty			12/15
think it fits best. Be a information. If more s Answer every question	as complete and accura space is needed, attach on.	pe items. List an asset only once. If ate as possible. If two married peop a a separate sheet to this form. On the	le are filing together, both a he top of any additional pag	re equally responsible for	or supplying correct
Part 1: Describe Ea	ach Residence, Building	g, Land, or Other Real Estate You O	wn or Have an Interest In		
1. Do you own or have	ve any legal or equitabl	e interest in any residence, building	g, land, or similar property?		
No. Go to Part 2	2.				
☐ Yes. Where is the	the property?				
Part 2: Describe Yo	our Vehicles				
□ No ■ Yes	eks, tractors, sport u	tility vehicles, motorcycles			
_	oyota	Who has an interest in t	he property? Check one	the amount of any se	ed claims or exemptions. Put cured claims on Schedule D:
	amry D15	Debtor 1 only			Claims Secured by Property.
Approximate r	mileage: 47	,000 Debtor 2 only Debtor 1 and Debtor 2 At least one of the deb	•	Current value of the entire property?	e Current value of the portion you own?
Other informa	ttion.				
Other informa Fair Condi		Check if this is comm (see instructions)	nunity property	\$9,889.0	\$9,889.00

□ No
Official Form 106A/B
Schedule A/B: Property

Examples: Major appliances, furniture, linens, china, kitchenware

6. Household goods and furnishings

Debtor 1	Case 17-1624 Jorge Velasquez	14 Doc 1	Filed 05/25/17 Document	Entered 05/25/17 14:4 Page 11 of 54 Case number	18:11 (if known)	Desc Main	5/25/17 2:46PM
■ Yes.	Describe						
	Mis	c. Household I ows, sheets, la		chairs, sofas, tables, dishes,			\$890.00
□ No				oment; computers, printers, scanners	s; music c	ollections; electron	ic devices
	Mis	c. Electronics	- TV, DVD Player, La	ptop, Printer, Ipad.			\$492.00
Example No	other collections, m		ctibles	oks, pictures, or other art objects; sta	nmp, coin,	or baseball card c	ollections;
Example No	musical instruments	ic, exercise, and o	other hobby equipment; pment - Bicycle, Fre	bicycles, pool tables, golf clubs, skis; e Weights.	; canoes a	and kayaks; carper	ntry tools; \$225.00
■ No □ Yes. 11. Clother Examp	oles: Pistols, rifles, shot Describe		n, and related equipmen				
	Mis	c. Clothes & A	pparel		1		\$575.00
■ No □ Yes. 13. Non-fa Examp ■ No □ Yes. 14. Any otl ■ No	y ples: Everyday jewelry, Describe rm animals ples: Dogs, cats, birds, Describe	costume jewelry, horses sehold items yo	engagement rings, wed	ding rings, heirloom jewelry, watches		old, silver	
			rom Part 3, including a	ny entries for pages you have atta	ched	\$2	,557.00

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Document Page 12 of 54 . Case number *(if known)* Debtor 1 Jorge Velasquez Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... **Chase Bank** \$127.89 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

☐ Yes. Give specific information about them...

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Case number (if known) Document Debtor 1 Jorge Velasquez 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No

☐ Yes. Describe each claim.......

35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$127.89

Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Debt	or 1	Jorge Velasquez	DOCI	Documen		Page 14 of	54 Case number (if known)	Desc Main	5/25/17 2:46P
37. D o	o vou o	wn or have any legal or equi	itable interest i	n anv business-rela	ated r	property?			
	-	to Part 6.		•					
	Yes. G	o to line 38.							
Part 6		scribe Any Farm- and Commou own or have an interest in fa			ou Ov	vn or Have an Interes	st In.		
46. D	o you	own or have any legal or	r equitable in	terest in any farn	n- or	commercial fishin	ng-related property?		
ı	No. 0	Go to Part 7.							
[☐ Yes.	Go to line 47.							
Part 7	7:	Describe All Property You	Own or Have a	n Interest in That Y	ou Di	d Not List Above			
		have other property of a les: Season tickets, countr			st?				
	No	, , , , , , , , , , , , , , , , , , , ,	,						
	Yes. 0	Give specific information							
54.	Add th	ne dollar value of all of yo	our entries fro	om Part 7. Write t	hat ı	number here			\$0.00
Part 8	B:	List the Totals of Each Part	of this Form						
55.	Part 1	: Total real estate, line 2							\$0.00
56.	Part 2	: Total vehicles, line 5				\$9,889.00			
57.	Part 3	: Total personal and hou	sehold items	, line 15		\$2,557.00			
58.	Part 4	: Total financial assets, li	ine 36		_	\$127.89			
59.	Part 5	: Total business-related	property, line	45		\$0.00			
60.	Part 6	: Total farm- and fishing-	related prope	erty, line 52		\$0.00			
61.	Part 7	: Total other property no	t listed, line 5	54	+	\$0.00			

\$12,573.89

Copy personal property total

Official Form 106A/B Schedule A/B: Property

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

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\$12,573.89

\$12,573.89

		Case 17-16244	Docume		/17 14:48:11	Desc Main	5/25/17 2:46PM
Fil	l in this i	nformation to identify your	case:				
De	btor 1	Jorge Velasquez					
D.	btor 2	First Name	Middle Name	Last Name			
1	ouse if, filing) First Name	Middle Name	Last Name			
Un	ited State	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
Ca	se numbe	er					
(if k	nown)					Check if this	
						amended fili	ig
O	fficial	Form 106C					
S	ched	ule C: The Pr	operty You C	laim as Exemp	t		4/16
the nee cas	property yeded, fill of e number e each iter	you listed on Schedule A/B: ut and attach to this page as (if known). m of property you claim as	Property (Official Form 106 many copies of Part 2: Add	filing together, both are equally a A/B) as your source, list the propertional Page as necessary. On the the amount of the exemption	perty that you claim the top of any addition you claim. One w	as exempt. If more sonal pages, write your ay of doing so is to	space is ur name and o state a
any fun exe	applicated	ole statutory limit. Some ex be unlimited in dollar amo	cemptions—such as those ount. However, if you clair	the full fair market value of the e for health aids, rights to rece n an exemption of 100% of fail perty is determined to exceed	eive certain benefit market value und	s, and tax-exempt er a law that limits	retirement the
Pa	rt 1: lo	lentify the Property You Cl	aim as Exempt				
1.	Which s	set of exemptions are you	claiming? Check one only,	even if your spouse is filing with	you.		
	■ You a	are claiming state and federa	al nonbankruptcy exemption	s. 11 U.S.C. § 522(b)(3)			
	☐ You a	are claiming federal exemption	ons. 11 U.S.C. § 522(b)(2)				
2.	For any	property you list on Schee	dule A/B that you claim as	exempt, fill in the information	below.		
		cription of the property and li e A/B that lists this property	ne on Current value of t portion you own	he Amount of the exemption y	ou claim Spec	ific laws that allow e	xemption

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
Misc. Household Items - bed, dresser, chairs, sofas, tables, dishes,	\$890.00		\$890.00	735 ILCS 5/12-1001(b)	
pillows, sheets, lamps. Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
Misc. Electronics - TV, DVD Player, Laptop, Printer, Ipad.	\$492.00		\$492.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		
Misc. Art Prints and books Line from Schedule A/B: 8.1	\$375.00		\$375.00	735 ILCS 5/12-1001(b)	
Enternom ochedate AVD. G. 1			100% of fair market value, up to any applicable statutory limit		
Misc. Sports Equipment - Bicycle, Free Weights.	\$225.00		\$225.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 9.1			100% of fair market value, up to any applicable statutory limit		
Misc. Clothes & Apparel Line from Schedule A/B: 11.1	\$575.00		\$575.00	735 ILCS 5/12-1001(a)	
Line nom <i>Schedule PVD</i> . 11.1			100% of fair market value, up to any applicable statutory limit		

Desc Main Case 17-16244 Doc 1 Filed 05/25/17 Entered 05/25/17 14:48:11 5/25/17 2:46PM Document Page 16 of 54 Case number (if known) Debtor 1 Jorge Velasquez Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Checking: Chase Bank** 735 ILCS 5/12-1001(b) \$127.89 \$127.89 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

	Case 17-10244	Doc 1 Filed 05/25/17 Document	Page 17	1 US/25/17 14. of 5/	46.11 Desci	/Iaiii 5/25/17 2:46Pf
Fill in th	is information to identify yo		1 71111. 17	(), ()4		
Debtor 1	Jorge Velasque	27				
JODIOI 1	First Name	Middle Name	Last Name			
Debtor 2		ACT III AL				
Spouse if,	filing) First Name	Middle Name	Last Name			
Jnited S	tates Bankruptcy Court for the	e: NORTHERN DISTRICT OF ILLI	INOIS			
Case nu	mber					
if known)					☐ Check	t if this is an
					amen	ded filing
Officia	l Form 106D					
		s Who Have Claims	Sacurad	l by Proport	.,	40/45
sche	dule D. Creditors	s Who Have Claims S	secui ed	by Propert	у	12/15
		. If two married people are filing togethe out, number the entries, and attach it to				
	, copy the Additional Page, fill it f known).	out, number the entries, and attach it to	o this form. On	the top of any addition	nai pages, write your na	ime and case
. Do any	creditors have claims secured b	y your property?				
□N	o. Check this box and submit	this form to the court with your other	schedules. Yo	u have nothing else t	o report on this form.	
Y	es. Fill in all of the information	below.				
Part 1:	List All Secured Claims					
2. List all	secured claims. If a creditor has	more than one secured claim, list the cred	ditor separately	Column A	Column B	Column C
		is a particular claim, list the other creditors tical order according to the creditor's name		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	•	tical order according to the creditor s riame	, .	value of collateral.	claim	If any
<i>7</i> 1 1	yota Financial rvices	Describe the property that secures the	he claim:	\$23,365.00	\$9,889.00	\$13,476.00
	ditor's Name	2015 Toyota Camry 47,000 m		· · · · · · · · · · · · · · · · · · ·		
		Fair Condition				
DC.	BOX 8026	As of the date you file, the claim is: 0	Check all that			
_	edar Rapids, IA 52409	apply. Contingent				
	nber, Street, City, State & Zip Code	☐ Unliquidated				
	insol, subst, suly, state a zip sous	☐ Disputed				
Nho owe	es the debt? Check one.	Nature of lien. Check all that apply.				
Debto	r 1 onlv	☐ An agreement you made (such as m	nortgage or secu	ured		
Debto		car loan)				
	r 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mec	hanic's lien)			
_	st one of the debtors and another	☐ Judgment lien from a lawsuit	,			
	c if this claim relates to a nunity debt	■ Other (including a right to offset)	Auto Loan			
Date deb	t was incurred 05/2015	Last 4 digits of account numb	er XXXX			
Add the	dollar value of your optrice in	Column A on this page. Write that numb	or hore:	\$23,36	55.00	
	•	the dollar value totals from all pages.	Jei IIEIE.			
	at number here:			\$23,36) DU.CC	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Write that number here:

	Cas	se 17-16244	Doc 1	Filed 05/25/1 Document		ed 05/25/17 14:48:	11 Des	sc Main 5/25/17 2:46PM
Fill in	this informa	ation to identify you	ır case:	Documen	Paue I	6 UL 34		
Debtor	1	Jorge Velasque	z					
		First Name		e Name	Last Name			
Debtor (Spouse		First Name	Middle	e Name	Last Name			
' '								
United	States Banl	kruptcy Court for the	: NORTHE	RN DISTRICT OF I	LLINOIS			
Case r	number							
(if known)						_	check if this is an
							а	mended filing
Offici	al Form	106E/F						
_		F: Creditors	Who Hav	e Unsecured	Claims			12/15
						Part 2 for creditors with NONF	PRIORITY clai	
						contracts on Schedule A/B: Prant any creditors with partially se		
Schedul	le D: Creditor	s Who Have Claims S	ecured by Prop	perty. If more space is	s needed, copy t	the Part you need, fill it out, n	umber the en	tries in the boxes on the
		per (if known).	age. II you nav	e no information to r	eport iii a Fart, t	do not me that Part. On the to	p or any addit	ionai pages, write your
Part 1:	List All	of Your PRIORITY	Unsecured C	laims				
1. Do	any creditors	s have priority unsecu	ıred claims aga	ninst you?				
	No. Go to Pa	rt 2.						
	Yes.							
Part 2:	List All	of Your NONPRIOR	RITY Unsecure	ed Claims				
3. Do	any creditors	s have nonpriority un	secured claims	against you?				
	No. You have	nothing to report in this	s part. Submit th	nis form to the court wit	h your other sche	edules.		
	Yes.							
		annriarity uncourred	alaima in the a	alphabatical order of	the ereditor who	holds each claim. If a credito	b.c tb.c	n ana nannriaritu
uns	secured claim,	list the creditor separa	tely for each cla	im. For each claim liste	ed, identify what t	ype of claim it is. Do not list cla	ims already inc	cluded in Part 1. If more
	n one creditor t 2.	holds a particular clain	n, list the other c	creditors in Part 3.If you	ı have more than	three nonpriority unsecured cla	aims fill out the	Continuation Page of
								Total claim
4.1	Access N	Neurocare		Last 4 digits of ac	count number	XXXX		\$98.39
		Creditor's Name				44/0040		· · · · · · · · · · · · · · · · · · ·
	750 Fletc Elgin, IL	her Drive		When was the del	ot incurred?	11/2016		-
		eet City State Zlp Code		As of the date you	ı file, the claim i	s: Check all that apply		
	Who incurr	ed the debt? Check or	ne.					
	Debtor 1	only		☐ Contingent				
	Debtor 2	only		☐ Unliquidated				
	Debtor 1	and Debtor 2 only		☐ Disputed				
	☐ At least of	one of the debtors and	another	Type of NONPRIC	RITY unsecured	d claim:		
		this claim is for a co	mmunity	☐ Student loans				
	debt Is the claim	subject to offset?		□ Obligations aris report as priority class.		ration agreement or divorce that	at you did not	
	■ No	•				g plans, and other similar debts	3	
	☐ Yes			Other. Specify	Medical			
				— Other, Specify				

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Debtor	1 Jorge Velasquez		Case number (if know)				
4.2	Advocate Sherman Hospital	Last 4 digits of account number	5482	\$295.00			
	Nonpriority Creditor's Name 35134 Eagle Way	When was the debt incurred?	10/2016				
-	Chicago, IL 60678 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Medical					
4.3	Alexian Brothers Medical Center	Last 4 digits of account number	xxxx	\$128.00			
	Nonpriority Creditor's Name c/o MiraMed Revenue Group	When was the debt incurred?	02/2016				
	991 Oak Creek Dr. Lombard, IL 60148	mon was the door mounted.	02/2010				
-	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	•				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims					
	■ No	Debts to pension or profit-sharin					
	Yes	Other. Specify Medical	· 				
4.4	Best Buy	Last 4 digits of account number	xxxx	\$1,223.00			
	Nonpriority Creditor's Name PO BOX 6497	When was the debt incurred?	09/2007				
	Sioux Falls, SD 57117 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	,	э энгэн энг эрру				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing					
	☐ Yes	Other. Specify Credit Card					

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Debtor 1 Jorge Velasquez 4.5 \$1,126.00 **Bloomingdale FPD** Last 4 digits of account number XXXX Nonpriority Creditor's Name c/o Wakefield & Associates When was the debt incurred? 01/2014 PO BOX 441590 Aurora, CO 80044 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other, Specify **Capital One** 4.6 Last 4 digits of account number **XXXX** \$676.00 Nonpriority Creditor's Name PO BOX 30281 When was the debt incurred? 03/2010 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Cards ☐ Yes \$703.51 4.7 **Capital One** Last 4 digits of account number 2161 Nonpriority Creditor's Name c/o Firstsource Advantage When was the debt incurred? 12/2013 205 Bryant Woods South Buffalo, NY 14228 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Credit Cards

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Debtor	1 Jorge Velasquez	Case number (if know)	
4.8	Carsons	Last 4 digits of account number XXXX	\$1,592.00
	Nonpriority Creditor's Name c/o Portfolio Recovery PO BOX 12914 Norfolk, VA 23541	When was the debt incurred? 04/2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Cards	
4.9	Citibank	Last 4 digits of account number 0189	\$1,283.45
	Nonpriority Creditor's Name c/o Midland Credit Management PO BOX 13386	When was the debt incurred? 12/2014	
	Roanoke, VA 24033		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Cards	
4.1			
0	Enhanced Medical Imaging	Last 4 digits of account number XXXX	\$71.00
	Nonpriority Creditor's Name c/o Americollect 1851 S. Alverno Rd.	When was the debt incurred? 04/2015	
	Manitowoc, WI 54220	_	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	

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4.1 1	HSBC	Last 4 digits of account number 2001	\$704.65
	Nonpriority Creditor's Name c/o Capital Management Services LP	When was the debt incurred? 01/2015	
	698 1/2 South Ogden St. Buffalo, NY 14206 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Cards	
4.1 2	Kohls	Last 4 digits of account number XXXX	\$3,029.00
	Nonpriority Creditor's Name PO BOX 3115	When was the debt incurred? 06/2009	
	Milwaukee, WI 53201 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	one of the same, and one of the same and the	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Credit Cards	
4.1 3	Kohls	Last 4 digits of account number 7052	\$3,122.29
	Nonpriority Creditor's Name c/o Merchants & Medical Credit Corp	When was the debt incurred? 01/2015	
	6324 Taylor Dr. Flint, MI 48507 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Cards	
		1,	

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Debtor 1 Jorge Velasquez 4.1 Macys **XXXX** \$1,059.00 Last 4 digits of account number Nonpriority Creditor's Name **PO BOX 8218** When was the debt incurred? 03/2011 Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Cards ☐ Yes 4.1 Merit Sleep Management **XXXX** \$82.00 Last 4 digits of account number 5 Nonpriority Creditor's Name c/o Keynote Consulting When was the debt incurred? 04/2015 220 W. Campus Dr. Suite 102 Arlington Heights, IL 60004 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Medical 4.1 **Northwestern Medicine** 4516 \$45.00 Last 4 digits of account number 6 Nonpriority Creditor's Name c/o Nationwide Credit Collection When was the debt incurred? 05/2016 815 Commerce Dr. Suite 270 Oak Brook, IL 60523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Medical

Document

Page 24 of 54 Case number (if know) Debtor 1 Jorge Velasquez

Number Street City State Zip Code When was the debt incurred? 11/2016	4.1	Presence Health	Last 4 digits of account number	5719	\$3,025.00
Number Street City State Zip Code Who Incurred the debt? Check one. Debtor 1 only	7	Nonpriority Creditor's Name 32816 Collection Center Dr.	_		ψο,ο20.00
Debtor 1 and Debtor 2 only Disputed		Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Debtor 2 only		Debtor 1 only	☐ Contingent		
At least one of the debtors and another Check if this claim is for a community debt Student loans Check if this claim is for a community debt Student loans Check if this claim is for a community debt Check if this claim is for a community Check if this claim is for a community Check if this claim is for a community Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community Check if thi		Debtor 2 only			
Check if this claim is for a community debt Check one. Check of the debtors and another Check of the claim subject to offset?		☐ Debtor 1 and Debtor 2 only	☐ Disputed		
Cobligations arising out of a separation agreement or divorce that you did not report as priority claims		\square At least one of the debtors and another		d claim:	
Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts					
Ves Cother. Specify Medical				ration agreement or divorce that you did not	
A		■ No	<u></u>	g plans, and other similar debts	
Sears Last 4 digits of account number 4806 \$392.79		Yes	Other. Specify Medical		
32816 Collection Center Dr. Chicago, IL 60693 Number Street (City, State Zip Code Who incurred the debt? Check one. Debtor 1 only Contingent Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: State claim subject to offset? Debtor 1 and Debtor 2 only Debtor 1 state Zip Code Type of Nonpriority Creditor's Name PO BOX 6282 Sioux Falls, SD 57117 Number Street (City, State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Disputed Type of NonPRIORITY unsecured claim: Student loans Student loans At least one of the debtors and another Check if this claim is for a community debt Debtor 1 only Disputed Type of NonPRIORITY unsecured claim: Student loans Disputed Dispute			Last 4 digits of account number	4806	\$92.79
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only		32816 Collection Center Dr.	When was the debt incurred?	11/2016	
□ Debtor 1 only □ Debtor 2 only □ Unliquidated □ Debtor 2 only □ Disputed □ Student loans □ Student loans □ Student loans □ Student loans □ Debtor 1 and Debtor 2 only □ Disputed □ Check if this claim is for a community debt □ Sears □ Contingent □ Other. Specify Medical □ Sears □ Contingent □ Other. Specify Medical □ Sears □ Contingent □ Student loans □ Sears □ Contingent □ Other. Specify Medical □ Sears □ Contingent □ Student loans □ Sears □ Contingent □ Other. Specify Medical □ Sears □ Contingent □ Student loans □ Sears □ Contingent □ Other. Specify Medical □ Sears □ Sears □ Contingent □ Contingent □ Debtor 1 only □ Contingent □ Debtor 1 and Debtor 2 only □ Disputed □ Debtor 1 and Debtor 2 only □ Disputed □ Contingent □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts			As of the date you file, the claim i	s: Check all that apply	
Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Sears Nonpriority Creditor's Name PO BOX 6282 Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Check if this claim is for a community debt Is the claim subject to offset? Student loans Check if this claim is for a community debt Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts XXXX \$1,174.00 XXXX \$1,174.00 \$1,174.00 Student loans Contingent Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		Who incurred the debt? Check one.			
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No		■ Debtor 1 only	☐ Contingent		
At least one of the debtors and another Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Medical		Debtor 2 only	☐ Unliquidated		
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Check if this claim is for a community debt Check of the claim subject to offset? Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt No Check if this claim is for a community debt No Check if this claim is for a community debt No Check if this claim is for a community debt No Check if this claim is for a community debt No Check if this claim is for a community debt No Check if this claim is for a community debt No Check if this claim is for a community clebt is the claim subject to offset? Check on position or profit-sharing plans, and other similar debts Check in a separation agreement or divorce that you did not report as priority claims Check image and other similar debts Check image are priority claims Check image		\square At least one of the debtors and another	<u></u> '	d claim:	
Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Last 4 digits of account number XXXX \$1,174.00 As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Contingent Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only Debtor 1 and Debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Debts to pension or profit-sharing plans, and other similar debts XXXX \$1,174.00 XXXX \$1,174.00 Ax of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Contingent Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts			_		
No				ration agreement or divorce that you did not	
Sears Nonpriority Creditor's Name PO BOX 6282 Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Debts to pension or profit-sharing plans, and other similar debts Last 4 digits of account number XXXX \$1,174.00 \$1,174.00 \$1,174.00 \$1,174.00 \$1,174.00 \$1,174.00 \$1,174.00 \$1,174.00		<u> </u>	<u>_</u>	g plans, and other similar debts	
Sears		Yes	Other. Specify Medical		
Nonpriority Creditor's Name PO BOX 6282 Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? 12/2011 As of the date you file, the claim is: Check all that apply Lontingent Unliquidated Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	4.1	Const		VVVV	¢4.474.00
When was the debt incurred? Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 sthe claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	9		Last 4 digits of account number		\$1,174.00
Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		PO BOX 6282	When was the debt incurred?	12/2011	
□ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts			As of the date you file, the claim i	s: Check all that apply	
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		Who incurred the debt? Check one.			
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		■ Debtor 1 only	☐ Contingent		
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		☐ Debtor 2 only	☐ Unliquidated		
☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts		☐ Debtor 1 and Debtor 2 only	•		
debt Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other similar debts		\square At least one of the debtors and another	<u></u> '	d claim:	
Is the claim subject to offset? report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		•			
■ No □ Debts to pension or profit-sharing plans, and other similar debts				ration agreement or divorce that you did not	
☐ Yes ☐ Other. Specify Credit Cards			<u></u>	g plans, and other similar debts	
		□Yes	■ Other. Specify Credit Card	ls	

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Case number (if know)

4.2	Sherman Hospital	Last 4 digits of account number	7740	\$75.00		
	Nonpriority Creditor's Name c/o MiraMed Revenue Group Dept. 77304 PO BOX 7700	When was the debt incurred?				
	Detroit, MI 48277 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	_	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Medical				
4.2	Suburban Surgical Care Specialists	Last 4 digits of account number	8625	\$80.00		
	Nonpriority Creditor's Name 4885 Hoffman Blvd. Suite 400 Hoffman Estates, IL 60192	When was the debt incurred?	05/2014			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin				
	■ No □ Yes	Other. Specify Medical	g pians, and other similar debts			
4.2						
2	Toys R Us	Last 4 digits of account number	XXXX	\$1,015.00		
	Nonpriority Creditor's Name PO BOX 905005 Orlando, FL 32896	When was the debt incurred?	06/2014			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing				
	☐ Yes	Other. Specify Credit Card	ls			

Debtor 1 **Jorge Velasquez**

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Case number (if know)

Debtor 1 Jorge Velasquez 4.2 Walmart **XXXX** \$2,281.02 Last 4 digits of account number 3 Nonpriority Creditor's Name PO BOX 956024 07/2009 When was the debt incurred? Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Cards ☐ Yes

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				1	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	22,981.10
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	22,981.10

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Page 27 of 54 Document Fill in this information to identify your case: Debtor 1 Jorge Velasquez Middle Name Last Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	-				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	-

	0030 17 10244 1	Docume	nt Page 28 of	f 54	5/25/17 2:46PM
Fill in this	information to identify your	case:			
Debtor 1	Jorge Velasquez				
Daluaro	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	ber				
(if known)					Check if this is an amended filing
Official	L Corm 100L				ŭ
	l Form 106H Iule H: Your Cod	obtors			40/45
Sched	iule n. Toul Cou	eniors			12/15
ill it out, a	nd number the entries in the and case number (if known)	boxes on the left. Attach . Answer every question.	the Additional Page to	this page. On the top of	ed, copy the Additional Page, any Additional Pages, write
=					
■ No □ Yes					
	hin the last 8 years, have you a, California, Idaho, Louisiana,				tes and territories include
■ No.	Go to line 3.				
☐ Yes	s. Did your spouse, former spou	use, or legal equivalent live	with you at the time?		
in line Form	2 again as a codebtor only i	f that person is a guarant	or or cosigner. Make s	ure you have listed the cr	th you. List the person shown reditor on Schedule D (Official edule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The credito Check all schedules that	or to whom you owe the debt at apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
	Number Street City	State	ZIP Code	-	
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
	Number Street			=	

ZIP Code

Schedule H: Your Codebtors

State

City

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Fill	in this information to identify your c	ase:								
Del	otor 1 Jorge Velas	quez			_					
	otor 2 puse, if filing)				_					
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_					
	se number 									
0	fficial Form 106I					Ī	MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/1
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your sith you, do not inclu	spouse de infor	is liv mati	ing with on abou	you, inclu t your spo	ude informa ouse. If more	ition about e space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-filin	ng spouse	
	If you have more than one job, attach a separate page with information about additional		☐ Employed				☐ Employed			
		Employment status	■ Not employed		☐ Not e	mployed				
	employers.	Occupation								
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?				_			
Par	t 2: Give Details About Mor	nthly Income								
spou If yo	mate monthly income as of the duse unless you are separated. The variable of the duse unless you are separated. The variable of the duse in the duse	ore than one employer, co	, g			·			·	J
						For De	btor 1	For Debte		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	-
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	- 1

0.00

N/A

Calculate gross Income. Add line 2 + line 3.

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Debt	or 1	Jorge Velasquez	-	(Case n	umber (if ki	nown)	_				
					For I	Debtor 1				Debtor 2		
	Cop	by line 4 here	4.		\$	(0.00	_	\$		N/A	<u> </u>
5.	List	all payroll deductions:										
-	5a.	Tax, Medicare, and Social Security deductions	5a	a	\$		0.00		\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	_	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50		\$		0.00	_	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50		<u>\$</u> —		0.00	_	\$		N/A	_
	5e.	Insurance	5e		<u>\$</u> —		0.00	_	\$		N/A	_
	5f.	Domestic support obligations	5f		\$		0.00	_	\$		N/A	_
	5g.	Union dues	50	J .	\$		0.00	_	\$		N/A	_
	5h.	Other deductions. Specify:		1.+	\$		0.00	_	\$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	(0.00	<u>, </u>	\$		N/A	<u>.</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	(0.00	<u>.</u>	\$		N/A	<u> </u>
8.	List 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0 -		•				•			
	01	monthly net income.	88		\$		0.00	_	\$		N/A	_
	8b.	Interest and dividends	8b).	\$	(0.00	_	\$		N/A	<u>\</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80) .	\$	(0.00)	\$		N/A	
	8d.	Unemployment compensation	80	d.	\$		0.00	_	\$		N/A	_
	8e.	Social Security	86	€.	\$	1,620			\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$	(0.00)	\$		N/A	
	8g.	Pension or retirement income	8g	J .	\$	(0.00	_	\$		N/A	1
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$	(0.00	<u>+</u>	\$		N/A	<u> </u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	§	1,620	0.00	,	\$		N/	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	1	,620.00	+ 5	\$		N/A	= \$	1,620.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				,					_	,
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not ecify:	depe			•		-		chedule 11.	4	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certaillies								12.	\$	1,620.00
13.	Do	you expect an increase or decrease within the year after you file this form	?								Combi month	ned ly income
		No.										
	П	Yes. Explain:									-	

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Fill in this information to identify your case: Debtor 1 Check if this is: Jorge Velasquez ☐ An amended filing Debtor 2 A supplement showing postpetition chapter 13 expenses as of the following date: (Spouse, if filing) MM / DD / YYYY United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS (If known) Official Form 106J **Schedule J: Your Expenses** 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household Is this a joint case? No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household? ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? No Do not list Debtor 1 and Fill out this information for Dependent's relationship to Dependent's Does dependent ☐ Yes. each dependent..... Debtor 1 or Debtor 2 live with you? Debtor 2. age ☐ No Do not state the dependents names. ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes Do your expenses include No expenses of people other than ☐ Yes yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income Your expenses (Official Form 106I.) The rental or home ownership expenses for your residence. Include first mortgage 625.00 4. \$ payments and any rent for the ground or lot. If not included in line 4: Real estate taxes 4a. \$ 0.00

4b. \$

4c. \$

4d. \$

5. \$

0.00

0.00

0.00

4b.

4c.

Property, homeowner's, or renter's insurance

Home maintenance, repair, and upkeep expenses

Additional mortgage payments for your residence, such as home equity loans

Homeowner's association or condominium dues

Debtor 1		Jorge Velasquez		ber (if known)	
6.	Utiliti	es:			
-	6a.	Electricity, heat, natural gas	6a.	\$	75.00
	6b.	Water, sewer, garbage collection	6b.	\$	0.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	57.00
	6d.	Other. Specify:	6d.	\$	0.00
7.	Food	and housekeeping supplies	7.	\$	400.00
8.		care and children's education costs	8.	\$	0.00
9.	Cloth	ing, laundry, and dry cleaning	9.	\$	25.00
10.		onal care products and services	10.	\$	75.00
11.		cal and dental expenses	11.	\$	135.00
12.	Trans	sportation. Include gas, maintenance, bus or train fare.			
		ot include car payments.	12.	\$	130.00
13.	Enter	tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	35.00
14.	Chari	table contributions and religious donations	14.	\$	25.00
15.	Insur	ance.			
		ot include insurance deducted from your pay or included in lines 4 or 20.			
	15a.	Life insurance	15a.	·	0.00
	15b.	Health insurance	15b.	\$	0.00
	15c.	Vehicle insurance	15c.	\$	88.00
	15d.	Other insurance. Specify:	15d.	\$	0.00
16.		s. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Speci		16.	\$	0.00
17.		llment or lease payments:			
		Car payments for Vehicle 1	17a.	·	435.00
	17b.	Car payments for Vehicle 2	17b.	\$	0.00
	17c.	Other. Specify:	17c.	\$	0.00
		Other. Specify:	17d.	\$	0.00
18.		payments of alimony, maintenance, and support that you did not report a		•	0.00
		cted from your pay on line 5, Schedule I, Your Income (Official Form 106I)). 18.		
19.		payments you make to support others who do not live with you.		\$	0.00
	Speci		19.	_	
20.		r real property expenses not included in lines 4 or 5 of this form or on Sci			0.00
		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.	·	0.00
		Property, homeowner's, or renter's insurance	20c.	·	0.00
		Maintenance, repair, and upkeep expenses	20d.		0.00
		Homeowner's association or condominium dues	20e.	· -	0.00
21.	Othe	r: Specify:	21.	+\$	0.00
22	Calcu	ılate your monthly expenses			
		Add lines 4 through 21.		\$	2,105.00
		Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2)	\$	2,100.00
			-	\$	0.405.00
	220.7	Add line 22a and 22b. The result is your monthly expenses.		Φ	2,105.00
23.	Calcu	ulate your monthly net income.			
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,620.00
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,105.00
				-	,
	23c.	Subtract your monthly expenses from your monthly income.			405.00
		The result is your monthly net income.	23c.	\$	-485.00
24.	For ex	ou expect an increase or decrease in your expenses within the year after ample, do you expect to finish paying for your car loan within the year or do you expect you cation to the terms of your mortgage?			ase or decrease because of a

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Fill in this info	rmation to identify your	case:			
Debtor 1	Jorge Velasquez				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
Official For Declara		an Individual	Debtor's So	chedules	12/15
obtaining mone years, or both.		n connection with a banl			ment, concealing property, or 0, or imprisonment for up to 20
Did you pa	ay or agree to pay some	eone who is NOT an attor	rney to help you fill out I	pankruptcy forms?	
■ No					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	·	,
Y /a/ la:	rao Volacauca		X		
	rge Velasquez Velasquez		^ Signature of	Debtor 2	
	ure of Debtor 1		Signature of	DCDIOI Z	

Date _____

Date May 25, 2017

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Fill in th	is informa	tion to identify you	r case:			
Debtor 1		Jorge Velasque				
DCDIOI 1		First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		First Name	Middle Name	Last Name		
	•,	ruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Case nui	mher					
(if known)						theck if this is an mended filing
o	. –	407				
	al Forr		Affairs for Individ	luals Filing for B	ankruntcy	4/16
Be as con	mplete and on. If mod (if known).	d accurate as poss re space is needed, Answer every que	ible. If two married people a attach a separate sheet to stion.	re filing together, both are this form. On the top of any	equally responsible for sup additional pages, write you	
		current marital statu	arital Status and Where You us?	Lived Belore		
	Married Not marrie					
2. Duri	ng the las	t 3 years, have you	lived anywhere other than	where you live now?		
	No Yes. List a	all of the places you	ived in the last 3 years. Do no	ot include where you live now	:	
Dek	otor 1 Prio	r Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	No Vaa Mala	and the second s	hadula II. Vaus Cadabtaus (Ol	fficial Form 400U)		
Part 2	_	the Sources of You	hedule H: Your Codebtors (Of Ir Income	ticiai Form 106H).		
Fill in	n the total	amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
□	No Yes. Fill ir	n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		ear before that: ember 31, 2015)	■ Wages, commissions, bonuses, tips	\$19,600.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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				Debtor 1		Debtor 2				
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)		
	r the calend anuary 1 to	dar year: December 3	31, 2014)	■ Wages, commissions, bonuses, tips	\$11,593.00	☐ Wages, commissions, bonuses, tips				
				☐ Operating a business		☐ Operating a	business			
5.	Include include and other winnings. List each s	come regardl public benefi If you are filir	ess of wheth t payments; ng a joint cas ne gross inco	er that income is taxable. Ex- pensions; rental income; inte e and you have income that	o previous calendar years? amples of other income are a rest; dividends; money collect you received together, list it of tely. Do not include income t	ted from lawsuits; only once under De	royalties; and ebtor 1.			
				Debtor 1		Debtor 2				
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)		
Pa	rt 3: List	Certain Pay	ments You	Made Before You Filed for	Bankruptcy					
).	□ No.	Neither De individual p During the s No. Yes * Subject to	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment r Debtor 2 o 90 days befo Go to line 7 List below e include pay	personal, family, or househouse personal, family, or househouse you filed for bankruptcy, do an action to whom you part to a househouse you filed for bankruptcy, do an action to whom you part both have primarily consumer you filed for bankruptcy, do an action to whom you part for domestic support of the you filed for domestic support of the your filed fil	umer debts. Consumer debted purpose." id you pay any creditor a total id a total of \$6,425* or more ints for domestic support oblighis bankruptcy case. Its after that for cases filed on	I of \$6,425* or more pay ations, such as che or after the date or I of \$600 or more?	re? ments and thild support are fadjustment.	ne total amount you nd alimony. Also, do creditor. Do not		
			,	this bankruptcy case.						
	Creditor'	s Name and	Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this p	ayment for		
7.	Insiders in of which ye	clude your re ou are an off	elatives; any icer, director,	general partners; relatives of person in control, or owner or	a payment on a debt you or any general partners; partne of 20% or more of their voting clude payments for domestic	rships of which you securities; and ar	u are a gener ny managing	ral partner; corporations agent, including one for		
	☐ Yes.	List all paym	ents to an in	sider.						
	Incidor's	Name and	Addrass	Dates of navme	ant Total amount	Amount you	Reason for	r this navment		

paid

still owe

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Case 17-16244 Desc Main Page 36 of 54 Case number (if known) Document Debtor 1 Jorge Velasquez 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider **Insider's Name and Address** Amount you Reason for this payment Dates of payment **Total amount** paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. ☐ Yes. Fill in the information below **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address:

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total Value Describe what you contributed Dates you more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code)

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

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Description and value of the property transferred

Date Transfer was

made

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Debtor 1 Jorge Velasquez

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of Name of Financial Institution and Type of account or Last balance Date account was Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Owner's Name Where is the property? Describe the property Value (Number, Street, City, State and ZIF Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code)

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Case number (if known) Document Debtor 1 Jorge Velasquez

25.	На	ve you notified any governmental unit o	f any ı	release of hazardous material?				
		No						
		Yes. Fill in the details.						
		ame of site ddress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice	
26.	Ha	ve you been a party in any judicial or ad	minis	trative proceeding under any envi	ron	mental law? Include settlements a	and orders.	
		No Yes. Fill in the details.						
		ase Title ase Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case	
Par	11	: Give Details About Your Business or	Conn	nections to Any Business				
27.	Wi	thin 4 years before you filed for bankrup	tcy, d	id you own a business or have an	y of	f the following connections to any	business?	
		☐ A sole proprietor or self-employed						
		☐ A member of a limited liability com	pany ((LLC) or limited liability partnershi	ip (l	_LP)		
		☐ A partner in a partnership						
		☐ An officer, director, or managing ex	kecuti	ve of a corporation				
		☐ An owner of at least 5% of the votin	ng or e	equity securities of a corporation				
	■ No. None of the above applies. Go to Part 12.							
		Yes. Check all that apply above and fi	ll in th	e details below for each business	S .			
		Business Name Address	Des	Describe the nature of the business		Employer Identification number Do not include Social Security number or ITIN.		
		umber, Street, City, State and ZIP Code)	Nan	ne of accountant or bookkeeper		Dates business existed	number of fritt.	
		thin 2 years before you filed for bankrup titutions, creditors, or other parties.	tcy, d	id you give a financial statement t	to ai		ıde all financial	
		No						
		Yes. Fill in the details below.						
	A	ame Idress umber, Street, City, State and ZIP Code)	Dat	e Issued				
Par	12	: Sign Below						
are t	rue a b	ead the answers on this <i>Statement of Fi</i> and correct. I understand that making a rankruptcy case can result in fines up to C. §§ 152, 1341, 1519, and 3571.	false	statement, concealing property, of	or o	btaining money or property by fra		
/s/	Jor	ge Velasquez	_					
		Velasquez ure of Debtor 1		Signature of Debtor 2				
Dat	е	May 25, 2017	_	Date				
Did y ■ N □ Y	0	attach additional pages to Your Statem	ent of	Financial Affairs for Individuals F	Filin	g for Bankruptcy (Official Form 1	D7)?	
Did :		pay or agree to pay someone who is no	t an a	ittorney to help you fill out bankru	ptc	y forms?		
		Name of Person Attach the <i>Bankri</i> orm 107 Stater		Petition Preparer's Notice, Declaration f Financial Affairs for Individuals Filing			page 6	

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Fill in this inform	nation to identify your	case:			
Debtor 1	Jorge Velasquez First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
	nkruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS		
Office States Bar	intupley Court for the.	- NORTHERN BIO	THO TOT ILLINOIS		
Case number(if known)					☐ Check if this is an amended filing
Official For Statemen		n for Indiv	riduals Filin	g Under Chapte	er 7 12/15
	vidual filing under cha		l out this form if:		
You must file this	er is earlier, unless th	ithin 30 days after	you file your bankrup		et for the meeting of creditors, e creditors and lessors you list
	ople are filing together d date the form.	in a joint case, bo	th are equally respon	sible for supplying correct ir	nformation. Both debtors must
	nd accurate as possib our name and case nun		s needed, attach a sep	arate sheet to this form. On	the top of any additional pages,
	ur Creditors Who Have				
 For any credito information bel 		art 1 of Schedule D	: Creditors Who Have	Claims Secured by Property	y (Official Form 106D), fill in the
	ditor and the property the	hat is collateral	What do you intend secures a debt?	I to do with the property that	Did you claim the property as exempt on Schedule C?
Creditor's Tc name:	oyota Financial Serv	ices	☐ Surrender the pro☐ Retain the prope		□ No
Description of property securing debt:	2015 Toyota Camry Fair Condition	y 47,000 miles	■ Retain the proper Reaffirmation Ag □ Retain the proper	greement.	■ Yes
Part 2: List Yo For any unexpired in the information	n below. Do not list rea	ase that you listed Il estate leases. Un	expired leases are lea		ed Leases (Official Form 106G), fill le lease period has not yet ended. 2).
Describe your ur	nexpired personal prop	perty leases			Will the lease be assumed?
Lessor's name:					□ No
Description of least Property:	sed				☐ Yes
, ,					□ 162
Lessor's name: Description of leas	sed				□ No
Property:					☐ Yes
Lessor's name:					□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Jorge Velasquez			 Case numb	er (if known)		

Deb	otor 1	Jorge Velasquez	Case number (if known)			
_						
	cription perty:	n of leased	☐ Yes			
1 10	perty.		□ Yes			
	sor's na		□ No			
	cription perty:	n of leased				
FIU	perty.		☐ Yes			
Les	sor's na	ame:	□ No			
		n of leased	<u>_</u>			
Pro	perty:		☐ Yes			
	sor's na		□ No			
		n of leased	<u>_</u>			
PIO	perty:		☐ Yes			
Les	sor's na	ame:	□ No			
		n of leased	<u>_</u> .			
Pro	perty:		☐ Yes			
Par	t 3:	Sign Below				
		alty of perjury, I declare that I have indicate is subject to an unexpired lease.	cated my intention about any property of my estate that secures a deb	t and any personal		
X	/s/ Jo	orge Velasquez	X			
	Jorge Velasquez		Signature of Debtor 2	Signature of Debtor 2		
	Signa	ture of Debtor 1				
	Date	May 25, 2017	Date			

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-16244 Doc 1 Filed 05/25/17 Entered 05/25/17 14:48:11 Desc Main Document Page 47 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Jorge Velasquez		Case No.			
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COMPI	ENSATION OF ATTOR	NEY FOR DE	BTOR(S)		
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy, of	or agreed to be paid	o me, for services render	ed or to	
	For legal services, I have agreed to accept		\$	900.00		
	Prior to the filing of this statement I have received	d	\$	900.00		
	Balance Due		\$	0.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed com	npensation with any other person u	nless they are memb	ers and associates of my	law firm.	
	☐ I have agreed to share the above-disclosed compencopy of the agreement, together with a list of the n				irm. A	
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
Ì	 a. Analysis of the debtor's financial situation, and rene b. Preparation and filing of any petition, schedules, st c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] 	atement of affairs and plan which	may be required;		ey;	
	Negotiations with secured creditors to reaffirmation agreements and applicat 522(f)(2)(A) for avoidance of liens on h	ions as needed; preparation a				
5.	By agreement with the debtor(s), the above-disclosed f Representation of the debtors in any d any other adversary proceeding.			s, relief from stay ac	tions or	
		CERTIFICATION				
	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	any agreement or arrangement for p	payment to me for re	presentation of the debto	r(s) in	
N	May 25, 2017	/s/ James A. Youn	g			
	Date	James A. Young 6 Signature of Attorney	217342			
		James A. Young L				
		85 Market Street				
		Elgin, IL 60123 847-793-1031				
		sarai@jamesyoun	glaw.com		-	
		Name of law firm				

ENGAGEMENT FOR LEGAL SERVICES – CHAPTER 7 BANKRUPTCY

This Engagement for Legal Services, hereafter referred to as "Agreement", is hereby entered into by and between the law firm of James A. Young, herein after referred to collectively as "Counsel", and Client in connection with Counsel's representation of Client in a Chapter 7 Bankruptcy. Pursuant to this Agreement, Counsel and Client agree to as follows:

- 1. Retainer for Legal Services. The minimum amount that will be charged for this engagement will be \$160.00 ("Retainer"). The retainer paid by Client is considered an advance payment retainer, which means that once paid, the retainer becomes property of Counsel and will not be deposited into a client trust account, but rather into Counsel's general account. Client agrees and understands that the Advance Payment Retainer is non-refundable once paid due to Counsel's inability to accept other engagements which might conflict with our representation of you. Client has the right to request that the retainer be held in a client trust account as a security retainer allowing Counsel to bill at Counsel's hourly rate of \$275.00 per hour against said retainer. However if such retainer is requested, Counsel must decline the engagement for practical reasons including the potential accessibility of the security retainer by Client's creditors and increased staff and bookkeeping time required to properly administer a security retainer. This retainer does not cover representation of Client in any Adversary Proceedings that may be filed against Client by any creditors or the Bankruptcy Trustee. A separate Retainer will be required.
- 2. Additional Costs and Expenses. In addition to the retainer described above, Client is responsible for the court filing fee in the amount of \$335.00. The retainer described above does not cover the court filing fee and additional costs and expenses relating to the representation of Client by Counsel. Client agrees that he or she is responsible for any and all additional costs and expenses, which may include expenses for postage, photocopies, other professional fees, expert witness fees, credit counseling fees, credit report fees, etc. In the event that Counsel advances any amount towards payments of any additional costs and expenses, Client agrees to reimburse Counsel for said costs and expenses within fifteen (15) days from the date notified by Counsel of said advancement of costs and expenses.
- 3. Payment of Retainer and Court Filing Fee. Client understands that the Chapter 7 Bankruptcy Case will not be filed with the U.S. Bankruptcy Court until such time that the Retainer and Court Filing Fee are paid in full.
- 4. Additional Fees. This retainer does not cover any legal fees for legal services beyond the preparation of the bankruptcy petition and schedules and attendance of the First Meeting of Creditors. In the event that Counsel is required to appear at any continued First Meeting of Creditors or is required to appear in court to defend against or present any motions on Client's behalf, Client understands that Counsel reserves the right to bill Client for the additional time expended at his hourly rate of \$275.00 per hour. Client agrees to pay Counsel for said additional time expended within fifteen (15) days from the date notified by Counsel of said additional time expended.
- 5. <u>Clients Obligations.</u> The Client's obligations are as follows:
 - To promptly pay all legal fees, charges and the court filing fee.
 - b. To provide Counsel with all requested documents, bills, statements, payment advices, bank records, tax returns, tax bills, appraisals, retirement and savings accounts, income information and to sign any and all necessary forms to allow Counsel to secure such documentation.
 - To provide accurately and honestly for all of the information necessary to prepare and file the Chapter
 Bankruptcy case and other motions or proceedings arising during the course of the case.
 - d. To timely respond to all letters, emails and telephone calls from Counsel or any member of his staff.
 - e. To keep Counsel advised at all times of the Client's mailing and physical addresses, telephone numbers and email addresses.
 - f. To appear at the first meeting of creditors (341 Meeting) and at any other court hearings or meetings as may be required by the Court or any other party.
 - To keep all scheduled office appointments with Counsel and to notify Counsel in advance of any problems with the timing and scheduling of such appointments
 - h. To contact Counsel by telephone with the understanding that Counsel is only able to return calls between the hours of 9:00 a.m. and 5:00 p.m. If Counsel is available when the call is received, then the call will be taken at that time. However, if you have to leave a message for Counsel then you must provide a number that you can be reached at during the designated times. Counsel or Legal Assistant

- will make every effort to return all such telephone calls within 24 hours, excluding weekends and holidays.
- i. To provide any information requested of the Client by the Chapter 7 Trustee, the Bankruptcy Administrator or any other party in the case, unless the Court rules that the Client is not required to provide such information.
- j. To respond as soon as possible to any requests made by the Counsel to get copies of income tax returns from the respective taxing agencies for a period of two (2) years prior to the filing of your bankruptcy case.
- k. To sign a tax authorization form to authorize Counsel to get copies of income tax returns from the respective taxing agencies for a period of two (2) years prior to the filing of your bankruptcy case.
- To provide current bank account information to include monthly statements as requested and online account balances as of the date of the signing of your bankruptcy petition packet.
- 6. Attorney Withdrawal from a Chapter7 case, Adversary Proceeding or Contested Matter. Pursuant to the Local Rules of the Bankruptcy Court, Counsel shall remain the responsible attorney of record for the Client in all matters in the case until the case is closed, dismissed or the discharge is entered or until the Attorney is relieved from such representation by order of the Court. The parties agree that just reasons for Counsel to withdraw from the representation of the Client, include but are not limited to the following:
 - a. The failure of the Client to provide complete, truthful and accurate information to Counsel.
 - b. The failure of the Client to comply with the Client's obligations as provided for in this Agreement and in the Local Rules.
 - c. The failure of the Client to comply with any of the obligations imposed on the Client by the Bankruptcy Code and Bankruptcy Rules.
 - d. The failure or refusal of the Client to comply with the Client's obligations to provide any supplemental information to the Court or to the Chapter 7 Trustee or to correct any incorrect or incomplete information previously provided to the Court or to the Trustee.
 - e. The failure of the Client to pay for all legal fees and costs.
 - f. If the Client are husband and wife, then any separation, serious domestic dispute or divorce of the parties.
 - g. Any irreconcilable conflict between Counsel and Client with respect to the case.
- 7. <u>Non-Dischargeability of Certain Debts.</u> I have been advised that some debts are **NOT** discharged by a Chapter 7 Bankruptcy. I understand that some of the debts that are not dischargeable are
 - 1. Certain Tax debts and other debts or fines owed to governmental units, including parking tickets.
 - 2. Debts incurred by fraudulent means, including but not limited to, recent cash advances or other recent
 - 3. Accidents while driving under the influence of drugs and/or alcohol.
 - 4. Alimony and Child Support.
 - 5. Judgement liens and liens on property.
 - 6. Intentional torts.
 - 7. Credit card charges used to pay State or Federal Taxes.
 - 8. Student Loans owed to the government and non-governmental agencies, and
 - 9. Home Owners' or Condominium Association Dues.
- 8. <u>Scope of Services.</u> Client understands that Counsel has been hired to represent Client in his/her/their bankruptcy case only. Bankruptcy provides relief from debt, and as such Client understands that Counsel **HAS NOT** been hired to negotiate settlement agreements with Client's creditors or to repair Client's credit. Client agrees to be responsible for insuring the accuracy of his/her/their own credit report/history.
- 9. Representations. Every effort will be made to handle your case promptly and efficiently according to the highest legal and ethical standards. There have been no representations or guarantees made by Counsel regarding the outcome of the matter. Any discussion in this regard, past or present, are limited only to estimates based upon Counsel's experience and judgement, but in no event should be considered as a representation, promise or guarantee as to the result which might be obtainable.
- 10. <u>Severability.</u> If any clause, phrase, provision or portion of this Agreement or the application thereof to any person or circumstance shall be invalid or unenforceable under applicable law, such invalidity or unenforceability shall not

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- affect, impair or render invalid or unenforceable the remainder of this Agreement nor any other clause, phrase, provision or portion hereof.
- 11. Law Governing and Jurisdiction. This Agreement shall be interpreted in accordance with the laws of the State of Illinois and the parties irrevocably consent to the exclusive jurisdiction and venue of the Circuit Court of Kane County, Illinois located in Geneva, Illinois in connection with any action or proceeding arising out of or relating to this Agreement.

Client has been informed and fully understands the following restrictions regarding receiving a discharge in another bankruptcy once Client receives a discharge in this bankruptcy:

- a. A Chapter 7 Client may not be granted a discharge if a discharge was received under Chapter 7 in a case filed within eight (8) years of the filing of a Chapter 7 petition. (Eight years between Chapter 7 discharges).
- b. A Chapter 13 Client may not be granted a discharge if he/she/they received a discharge in a previous Chapter 7, 11 or 12 filed within four (4) years of the filing of a Chapter 13. (Four years between Chapter 7 and then a Chapter 13 discharge.)

AGREED TO BY:

Client	Date	
L. M. Dolley		
Client	Date	
Counsel	 Date	

James A. Young Attorney at Law 85 Market Street Elgin, IL 60123 (847) 608-9526

United States Bankruptcy CourtNorthern District of Illinois

		1 (of the District of Immors		
In re	Jorge Velasquez		Case No.	
		Debtor(s)	Chapter 7	
	VE	RIFICATION OF CREDITOR M	1ATRIX	
	. –		Creditors:	24
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credi	tors is true and correct to t	the best of my
Date:	May 25, 2017	/s/ Jorge Velasquez Jorge Velasquez		

Access Neurocare 750 Fletcher Drive Elgin, IL 60123

Advocate Sherman Hospital 35134 Eagle Way Chicago, IL 60678

Alexian Brothers Medical Center c/o MiraMed Revenue Group 991 Oak Creek Dr. Lombard, IL 60148

Best Buy PO BOX 6497 Sioux Falls, SD 57117

Bloomingdale FPD c/o Wakefield & Associates PO BOX 441590 Aurora, CO 80044

Capital One PO BOX 30281 Salt Lake City, UT 84130

Capital One c/o Firstsource Advantage 205 Bryant Woods South Buffalo, NY 14228

Carsons c/o Portfolio Recovery PO BOX 12914 Norfolk, VA 23541

Citibank c/o Midland Credit Management PO BOX 13386 Roanoke, VA 24033

Enhanced Medical Imaging c/o Americollect 1851 S. Alverno Rd. Manitowoc, WI 54220

HSBC c/o Capital Management Services LP 698 1/2 South Ogden St. Buffalo, NY 14206

Kohls PO BOX 3115 Milwaukee, WI 53201

Kohls c/o Merchants & Medical Credit Corp 6324 Taylor Dr. Flint, MI 48507

Macys PO BOX 8218 Mason, OH 45040

Merit Sleep Management c/o Keynote Consulting 220 W. Campus Dr. Suite 102 Arlington Heights, IL 60004

Northwestern Medicine c/o Nationwide Credit Collection 815 Commerce Dr. Suite 270 Oak Brook, IL 60523

Presence Health 32816 Collection Center Dr. Chicago, IL 60693

Presence Health 32816 Collection Center Dr. Chicago, IL 60693

Sears PO BOX 6282 Sioux Falls, SD 57117

Sherman Hospital c/o MiraMed Revenue Group Dept. 77304 PO BOX 7700 Detroit, MI 48277

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Suburban Surgical Care Specialists 4885 Hoffman Blvd. Suite 400 Hoffman Estates, IL 60192

Toyota Financial Services PO BOX 8026 Cedar Rapids, IA 52409

Toys R Us PO BOX 905005 Orlando, FL 32896

Walmart PO BOX 956024 Orlando, FL 32896